

EXHIBIT Q

State of California
County of Sonoma

In the Matter of the Investigation of the Death of)
RICHARD TIMOTHY DESANTIS)
Deceased)

Before

Bill Cogbill
Sheriff-Coroner

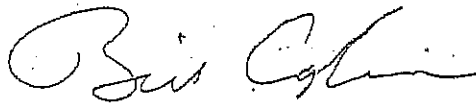
I, Bill Cogbill, Sheriff-Coroner of the County of Sonoma, State of California, in Santa Rosa, on the 10th day of August, 2007 having made investigation into the cause of death of Richard Timothy DeSantis and after hearing the testimony adduced, do say:

That I find that the deceased was Richard Timothy DeSantis was a native of TX aged about 30 years; and that he came to his death on the 9th day of April, 2007 at Driveway of own residence: 631 South Avenue, Santa Rosa, State of California, by:

Gunshot Wound of Left Lateral Chest

*Other significant conditions:
Superficial Gunshot Wound of Left Chest; Right
Distal Radius Fracture.*

All of which I certify by this investigation in writing by me, signed this
10th day of August, 2007.



Sheriff-Coroner of the County of Sonoma,
State of California

PHYSICIAN/CORONER'S AMENDMENT
DEATHS AFTER 1-1994
NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS
USE BLACK INK ONLY

1.1

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE FILE NUMBER

PART I INFORMATION TO LOCATE RECORD		3. LAST (FAMILY)	4. SEX
NAME AS IT APPEARS ON RECORD	1. NAME—FIRST (GIVEN)	DESANTIS	M
ADDITIONAL INFORMATION TO LOCATE RECORD	2. MIDDLE	7. COUNTY OF OCCURRENCE	
	TIMOTHY	SONOMA	
	5. DATE OF EVENT—MM/DD/CCYY	6. CITY OF OCCURRENCE	
	04/09/2007	SANTA ROSA	

PART II STATEMENT OF CORRECTIONS		10. INFORMATION AS IT SHOULD APPEAR
8. CERTIFICATE ITEM NUMBER	9. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	
107A	PENDING INVESTIGATION	GUNSHOT WOUND OF LEFT LATERAL CHEST
107AT		SECONDS
112		SUPERFICIAL GUNSHOT WOUND OF LEFT CHEST; RIGHT DISTAL RADIUS FRACTURE
119	PENDING INVESTIGATION	HOMICIDE
120		NO
121		04/09/2007
122		0124
123		OWN RESIDENCE
124		DECEDENT CHARGED AT POLICE OFFICERS IN THREATENING MANNER, AFTER FIRING HANDGUN INTO HIS OWN CEILING, FEARING FOR THEIR SAFETY, OFFICERS SHOT DECEDENT WITH DEPARTMENTAL WEAPONS.
125		631 SOUTH AVENUE, SANTA ROSA, CA 95407

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.			
DECLARATION OF CERTIFYING PHYSICIAN OR CORONER	11. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER	12. DATE SIGNED—MM/DD/CCYY	13. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER
	LESLIE COMRACK	08/07/2007	DEPUTY CORONER
STATE/LOCAL REGISTRAR USE ONLY	14. ADDRESS—STREET AND NUMBER	15. CITY	16. STATE
	3336 CHANATE ROAD	SANTA ROSA	CA
	17. ZIP CODE	18. DATE ACCEPTED FOR REGISTRATION—MM/DD/YY	
		95404	
	19. OFFICE OF VITAL RECORDS OR SIGNATURE OF LOCAL REGISTRAR		

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF VITAL RECORDS

Printed on: 08/07/2007 07:30 PM
By COMRACK, LESLIE (LCOMRACK)

VS 24A (REV. 10/03)

1.1

CERTIFICATE OF DEATH
STATE OF CALIFORNIA
USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS
VS-1 (REV 1/04)

LOCAL REGISTRATION NUMBER

STATE FILE NUMBER		2. MIDDLE		3. LAST (Family)	
1. NAME OF DECEDENT — FIRST (Given)		TIMOTHY		DESANTIS	
RICHARD					
AKA, ALSO KNOWN AS — Include full AKA (FIRST, MIDDLE, LAST)		4. DATE OF BIRTH mm/dd/yyyy		5. AGE Yrs.	
		01/21/1977		30	
				6. SEX	
				M	
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER		11. EVER IN U.S. ARMED FORCES?	
TX		462-47-0674		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
				12. MARITAL STATUS (at Time of Death)	
				MARRIED	
				7. DATE OF DEATH mm/dd/yyyy	
				04/09/2007	
				8. HOUR (24 Hours)	
				0138	
13. EDUCATION — Highest Level/Degree (see worksheet on back)		14/15. WAS DECEDENT HISPANIC/LATINO(AS)SPANISH? (If yes, see worksheet on back.)		15. DECEDENT'S RACE — Up to 3 races may be listed (see worksheet on back)	
GED		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WHITE	
17. USUAL OCCUPATION — Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.)		19. YEARS IN OCCUPATION	
IRON WORKER		BRIDGE CONSTRUCTION		6	
20. DECEDENT'S RESIDENCE (Street and number or location)					
631 SOUTH AVENUE					
21. CITY		22. COUNTY/PROVINCE		23. ZIP CODE	
SANTA ROSA		SONOMA		95407	
24. YEARS IN COUNTY		25. STATE/FOREIGN COUNTRY			
3		CA			
26. INFORMANT'S NAME, RELATIONSHIP					
PATRICIA FARRELL-DESANTIS, WIFE					
27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP)					
631 SOUTH AVENUE, SANTA ROSA, CA 95407					
28. NAME OF SURVIVING SPOUSE — FIRST		29. MIDDLE		30. LAST (Maiden Name)	
PATRICIA		DAWN		FARRELL	
31. NAME OF FATHER — FIRST		32. MIDDLE		33. LAST	
DAN		ANTHONY		DESANTIS	
34. BIRTH STATE		35. NAME OF MOTHER — FIRST		36. MIDDLE	
SD ARABIA		ADRIANNE		KIRK	
				37. LAST (Maiden)	
				PERRINE	
38. BIRTH STATE				CA	
39. DISPOSITION DATE mm/dd/yyyy		40. PLACE OF FINAL DISPOSITION			
04/12/2007		RES PATRICIA FARRELL-DESANTIS 631 SOUTH AVENUE, SANTA ROSA, CA 95407			
41. TYPE OF DISPOSITION(S)		42. SIGNATURE OF EMBALMER		43. LICENSE NUMBER	
CR/RES		NOT EMBALMED			
44. NAME OF FUNERAL ESTABLISHMENT		45. LICENSE NUMBER		46. SIGNATURE OF LOCAL REGISTRAR	
SANTA ROSA MORTUARY EGGEN & LAN		FD240		MARY MADDUX-GONZALEZ, MD	
47. DATE mm/dd/yyyy		101. PLACE OF DEATH			
04/12/2007		DRIVEWAY OF OWN RESIDENCE			
		102. IF HOSPITAL, SPECIFY ONE			
		<input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input checked="" type="checkbox"/> Other			
		103. CITY			
		SANTA ROSA			
		104. COUNTY			
		SONOMA			
		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location)			
		631 SOUTH AVENUE			
		106. CITY			
		SANTA ROSA			
		107. CAUSE OF DEATH			
		Enter the chain of events — diseases, injuries, or complications — that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.			
		IMMEDIATE CAUSE (A) PENDING INVESTIGATION			
		(B)			
		(C)			
		(D)			
		108. DEATH REPORTED TO CORONER?			
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
		109. BIOPSY PERFORMED?			
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
		110. AUTOPSY PERFORMED?			
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
		111. USED IN DETERMINING CAUSE?			
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107			
		113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.)			
		113A. IF FEMALE, PREGNANT IN LAST YEAR?			
		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK			
		114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.			
		Decedent Attended Since Decedent Last Seen Alive			
		115. SIGNATURE AND TITLE OF CERTIFIER			
		116. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE			
		117. LICENSE NUMBER			
		118. DATE mm/dd/yyyy			
		119. INJURED AT WORK?			
		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK			
		120. INJURY DATE mm/dd/yyyy			
		121. HOUR (24 Hours)			
		122. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)			
		123. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)			
		124. LOCATION OF INJURY (Street and number, or location, and city, and ZIP)			
		125. SIGNATURE OF CORONER / DEPUTY CORONER			
		LESLIE COMRACK			
		126. DATE mm/dd/yyyy			
		04/09/2007			
		127. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER			
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SONOMA COUNTY SHERIFF-CORONER INVESTIGATIVE REPORT

Page 1 of 4

CASE NUMBER:
07-0443

☒ Case ☐ No Case

INVESTIGATION INFORMATION

RECEIVED: 4/9/2007

TIME RECEIVED: 09:28

REPORTED BY: Sonoma County Sheriff's Detective Darin Dougherty

☐ Natural ☒ Homicide ☐ Suicide ☐ Teen Suicide ☐ Accident ☐ Undetermined ☐ SIDS ☐ Work Related ☐ Indigent
☐ Domestic Violence ☐ Under 14 Yrs. ☐ Out of County ☐ Hospital Less Than 24 Hrs ☒ Residence ☐ Home Hospice
Hospital: ☐ E.D. ☐ O.R./Recovery ☐ ICU ☐ In Patient ☐ Lic. Care Fac. ☐ SDC ☐ Other Location ☒ Autopsy
☐ Co-Sign ☐ Inspection ☐ Private Post ☒ Contract Removal ☒ Det. Response ☒ X-Rays ☐ Donor ☒ Tox

PERSONAL INFORMATION

Decedent's Name: (First): RICHARD (Middle): TIMOTHY (Last): DESANTIS
DOB: 01/21/1977 Age: 30 Race: White Sex: M Hair: BRN Eyes: HZL SSN: 462-47-0674
Driver's Lic. #: B3038891 State: CA Other I.D.:
Address: 631 South Avenue City: Santa Rosa State: CA Phone Number: (707) 526-5607
Occupation: Iron Worker Marital Status: Married
Next of Kin: Patricia DeSantis same as above Phone:
Relationship: Wife Date notified: 04/09/2007 Time notified: 0138 Notified by: Santa Rosa Police Department

DEATH INFORMATION

Date: 4/9/2007 Time: 0138 Location: Residence Address: 631 South Avenue City: Santa Rosa
☐ Found ☒ Pronounced dead by: Medic 771 Paramedic Amy Mottard
City: State: Phone:
Last seen or known alive, date: 04/09/2007 time: 0125
If injury, date: time: Place:
Witness(es) to injury:
Jurisdiction: Sonoma County Sheriff's Department Representative: Detective Al Vernon Case #: 07-0409-007

SCENE INFORMATION

Arrival date: 04/09/2007 time: 0954 ☐ No Response Temp/Weather cond: Outdoors; approximately 64 degrees F, +/-
Condition of scene:
Common driveway, ingress/egress of duplex: A tarp structure had been erected to restrict visibility from all sides and above, with the decedent located inside the structure.
Position and condition of body: Decedent was supine on the ground, with his right arm bent and left outstretched. He was wearing white ankle socks. His blue jeans were cut away from his left leg, although still attached to his right leg (with the lower portion cut off). Lifesaving apparatus was still in place. Defects/wounds located on the left upper chest and left side below
Identifying features: Identified by family members on scene.
Clothing description: Blue jeans and ankle socks, collected by SCSD Crime Scene Investigators as evidence.
Property removed: none ☐ Property record attached
Residence sealed, date: time: Released to:
If vehicle involved: ☐ Driver ☐ Motorcyclist ☐ Cyclist ☐ Passenger ☐ Pedestrian ☐ Airbag ☐ Seatbelt ☐ Helmet
☐ Skateboard ☐ Motorized Wheelchair ☐ ATV
Year: Model: Lic Plate: Vehicle disposition:
Weapon description: .40 cal. Handgun, .223 rifle, "SAGE" low lethal. Weapon disposition: collected as evidence by SCSD
Photos by: Det. Leslie Comrack ☐ Polaroid ☐ 35mm ☐ Video ☒ Digital Disposition: CD in case file

Primary physician: Kaiser Permanente		Phone number:		Date last seen:	
Other physician:		Phone number:		Who will sign D.C. Coroner	
.sis:					
Medical history: Bipolar disorder, polysubstance abuse, paranoia, delusional/hallucinations.					
Surgical procedures: Tibial fracture requiring open reduction and internal fixation, grafting, and pinning (motorcycle accident)					
Medications: Haldol, Zyprexa, Depakote, Norco					
Tobacco history: <input type="checkbox"/>		Alcohol history: <input checked="" type="checkbox"/>		Illicit drugs: <input checked="" type="checkbox"/>	
Cardiac history: <input type="checkbox"/> Unk <input type="checkbox"/> None <input type="checkbox"/> Hypertension <input type="checkbox"/> Arrhythmia's		<input type="checkbox"/> Heart attacks		Drug history: methamphetamine	
<input type="checkbox"/> Cardiac surgery <input type="checkbox"/> Bypass <input type="checkbox"/> Specific heart disease		Heart attack(s) date(s):			
Cardiac:		Disease:			
<input type="checkbox"/> Diabetes Mellitus Type:		<input type="checkbox"/> Stroke Stroke date(s):			
<input type="checkbox"/> Cancer Of what:		When diagnosed:			
Other disease(s) and condition(s):					

HOSPITAL INFORMATION

Hospital:		Admission Blood <input type="checkbox"/>	
date: time:		Method of transportation:	
<input type="checkbox"/> Donor Bank notified	Date:	Time:	Donor Bank name

MORTUARY INFORMATION

Where body stored: <input checked="" type="checkbox"/> CMF <input type="checkbox"/> Other:	Mortuary: Eggen & Lance
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NARRATIVE

Scene:

This death occurred at 631 South Avenue, Santa Rosa. As this incident involved Santa Rosa Police Department officers in a fatal altercation with the decedent, the Officer Involved Shooting protocol was invoked, and Sonoma County Sheriff's Department responded to investigate the incident. The scene was maintained as an active crime scene, with monitored ingress/egress by Sonoma County Sheriff's Department. The decedent was located outside in the driveway of the duplex, and a blue tarp structure had been erected around him to prevent visibility from the north, south, and east, as well as above, and to protect the integrity of the scene.

Body:

The decedent was found lying supine on the ground in the common driveway of the duplex in question. Airway apparatus, C-spine precautions, and monitor patches were still in place. The decedent's pants had been cut away on the left leg, and was still attached to the right leg around the upper thigh. It appeared the lower right pant leg had been cut away. The decedent had two visible circular defects/wounds: one was in the upper left chest, which was partially obscured by a tattoo. The tattoo (a dragon) curled from the decedent's back and over his left shoulder, ending on his chest. (There were additional tattoos on the decedent's back and shoulders which did not affect the visibility of any wounds or defects.) The second defect was located in the decedent's left side, below the armpit. The decedent had a noticeable lump in his left side abdomen, above the pelvic area, which appeared to be the presence of a foreign body beneath the

surface layers of skin. A reddish abrasion was pronounced, with associated discoloration surrounding it, was on the decedent's right side rib cage, which also appeared to be the presence of a foreign body beneath the surface layers of skin. There were reddish, dried abrasions on the decedent's forehead, right forearm (with associated bruising), and a long dried laceration on the front right calf. The left calf showed severe scarring and disfigurement from a previous injury or surgery.

The decedent was cold to the touch, with rigor mortis present in the extremities, but not set. Lividity was appropriate to the body's position. The decedent's clothing was collected by Sonoma County Sheriff's Department detectives. Upon the arrival of the mortuary removal service, the body was rolled to its side, and the decedent's back was photographed.

J&S Mortuary Removal Service responded to the scene, with attendants Perry Keaton and Richard Payne. They placed the decedent in a black biohazard body bag, and I followed them to the County Morgue Facility in order to maintain chain of custody. Upon our arrival, I secured the biohazard bag with a zip-tie lock, numbered 19929, through the zipper pulls on the bag. I placed strips of tape on either side of both zippers, recording the coroner's case number and my initials on each. The body was placed in the refrigerated morgue.

An examination has been scheduled with a staff Pathologist with the Forensic Medical Group.

I contacted Chuck Desepte with American Correctional Solutions, and requested full body X-rays of the decedent at the morgue facility. The X-rays were completed by 1400 hours, and were made available for the Pathologist's review. The seal of the bag was not disturbed during the X-ray procedure, and the body remained secure.

Investigation:

On 4/9/2007 at approximately 0700 hours, I was notified of an Officer Involved Shooting which had occurred at approximately 0124 hours in the jurisdiction of Santa Rosa Police Department. Sonoma County Sheriff's Dispatch advised that Santa Rosa Police Officers had responded to a domestic disturbance at 631 South Avenue, Santa Rosa, which involved a subject with a gun. After a short confrontation, the subject was shot by the officers, and was pronounced dead on scene. The Officer Involved Shooting protocol was invoked, and Sonoma County Sheriff's Department was investigating the incident.

At 0928 hours, I was contacted by Detective Darin Dougherty, requesting I respond to the scene. I arrived at 0954 hours, and met with Detective Al Vernon. He briefed me regarding the incident, describing the decedent's wife had called Santa Rosa Police Dispatch because the decedent had been "acting crazy." She described the decedent as bipolar, and said he was hearing people in the attic, although no one was there. The decedent was shooting a handgun into the ceiling of the residence, and was not wearing any clothing. The decedent's wife stated her 2 year old and 10 year old children were also present in the residence with them.

Det. Vernon advised that officers arrived on scene, and found the adult couple outside in the driveway. They were apparently ordered to lie prone on the ground. The decedent complied initially, then rose and came towards the officers. A low lethal 40 mm "SAGE" weapon was deployed, which fired a rubber baton projectile towards the decedent. There was no apparent effect on the decedent, and he continued to advance. Officers fired .223 rifle and .40 caliber handgun rounds at the decedent, and he fell to the ground. Medical personnel had staged nearby, and were called to the scene. They took lifesaving measures and attempted CPR for some time before pronouncing death at 0138 hours.

A plastic tarped structure had been erected to protect the integrity of the scene, and covered the decedent in the driveway. I went inside the tarp structure, and found the decedent lying supine on the ground, wearing socks, with his pants cut away from his left side. (The decedent had apparently dressed in pants some point in the chronology of events.) There was a pool and trail of blood which had formed beneath the left shoulder and arm of the decedent. Det. Vernon directed my attention to an abrasion and bruise on the decedent's right forearm, which was believed to be the impact site of the "SAGE" projectile, as well as the other visible defects/wounds. I photographed the decedent, and observed as Det. Dougherty collected

here is nothing further to report at this time.

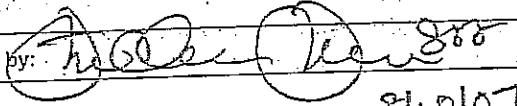
On 08/07/2007 I received a copy of the final autopsy report, prepared by Dr. Kelly Arthur. Dr. Arthur included that the cause of death was a gunshot wound of the left lateral chest, with other significant conditions including a superficial gunshot wound of the left chest, and a right distal radius fracture. Toxicology results from Central Valley Toxicology indicated the presence of Cannabinoids (THC metabolite), with delta-9-THC equalling 4.0 ng/mL, and delta-9-THC-COOH equalling 7.3 ng/mL. I amended the death certificate to reflect Dr. Arthur's findings. Please see her full report for a complete account of the autopsy examination.

I also received a copy of the investigative report, prepared by Det. Al Vernon. Det. Vernon's investigation was forwarded to the Sonoma County District Attorney's Office, who had no prosecutorial recommendations regarding the officers involved in this case. Please see Det. Vernon's complete investigation for further information.

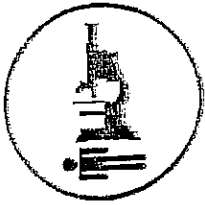
The manner of this death is ruled as a homicide.

The investigation is closed. There is nothing further to report.

Additional Contacts:

Detective Det. Leslie Comrack	Date: 4/9/2007	Time: 1745	Approved by: 
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Det. Sgt. M. Mana 8110107



Forensic Medical Group, Inc.
www.fmg-inc.com

1860 Pennsylvania Ave. Ste 150
Fairfield, California 94533

Mark A. Super M.D.
Arnold R. Josselson, M.D.
Gregory D. Reiber, M.D.

Kelly A. Arthur, M.D.
Ikechi O. Ogan, M.D.
Thomas H. Gill, M.D.

☒ AUTOPSY

☐ EXTERNAL EXAMINATION

NAME: DESANTIS, RICHARD TIMOTHY

CASE NO. 07-0443
(SON07-121)

POSTMORTEM DATE: 04-10-2007

TIME: 0845

PLACE OF DEATH: Residence

DATE: 04-09-2007
TIME: 0138

AGE: 30

SEX: Male

RACE: White

AUTOPSY FINDINGS:

1. Gunshot wounds of chest:
 - A. Gunshot wound of left upper chest (GSW #1):
 - i. Entrance: Left upper chest.
 - ii. Injuries: Anterior chest and abdominal wall subcutis and musculature without penetration into body cavities.
 - iii. Associated Injuries: Fracture of anterior left 7th rib with overlying cutaneous contusion.
 - iv. Recovery: Large caliber moderately-deformed partially jacketed bullet in subcutis of left abdominal wall and one triangular fragment of jacket in wound tract.
 - v. Path: Downward, slightly right to left and slightly front to back.
 - vi. Range: Indeterminate.
 - B. Gunshot wound of left lateral chest (GSW #2):
 - i. Entrance: Left lateral chest.
 - ii. Injuries: Perforation of left chest wall, left lung, aorta, right lung, diaphragm, liver and right chest wall.
 - iii. Associated Injuries: Pulpified wound tract through left lower lobe of lung, left hemidiaphragm and liver partially involving right adrenal gland; gaping transection of descending thoracic aorta; lateral left 7th rib fracture; bilateral hemothoraces (left 1000 ml, right 300 ml); trace upper quadrant hemoperitoneum.
 - iv. Recovery: Small caliber mildly-deformed fully jacketed bullet in right lateral chest wall soft tissue and musculature with overlying cutaneous contusion.
 - v. Path: Left to right, downward, without significant front/back deviation.
 - vi. Range: Indeterminate.
2. Blunt force injuries:
 - A. Abraded contusion with underlying non-displaced distal radius fracture, right forearm.
 - B. Cutaneous abrasions and contusions, face, right elbow and forearm, right foreleg and left ankle.
 - C. Small nicks and scratches, dorsal hands.
3. Cerebral edema.
4. History that the deceased was shot by police officer(s).

RECEIVED

AUG - 7 2007

CAUSE OF DEATH: Gunshot Wound of Left Lateral Chest (seconds).

OTHER SIGNIFICANT CONDITIONS: Superficial gunshot wound of left chest; right distal radius fracture.

Kelly A. Arthur
KELLY A. ARTHUR, M.D.
Forensic Pathologist

KAA/wg; tn
D: 04-10-2007
T: 04-16-2007
F: 8/7/07

The autopsy is conducted at the Sonoma County Sheriff-Coroner's Morgue Facility in Santa Rosa, CA, beginning at 0845 hours on April 10, 2007. Witnesses include C. Vivian and D. Dougherty (Sonoma County Sheriff's Department), P. Gillman (Petaluma Police Department), F. Foo (Santa Rosa Police Department) and C. Norick (Forensic Assistant).

EXTERNAL EXAMINATION:

The body is received in a black zipped body pouch with an identification strip of tape affixed to the front. The zippers of the bag are secured with blue plastic lock "19929" flanked by inscribed tape. An identification tag is on the right great toe. Postmortem x-rays of the entire head, body and extremities are taken. By report, GSR samples are collected from the hands at the scene.

When first viewed, the body is nude. Jewelry on the body consists of a yellow-metal ring with several small clear stones on the left ring finger.

The body is that of a normally developed and well-nourished White male whose appearance is compatible with the recorded age of 30 years. His body, nude, weighs 185 pounds (84 kg) and measures 66 1/2 inches (168 cm) in length. The body is cold subsequent to refrigeration, rigor mortis is fully developed, and lividity is reduced in amount on the back of the body where it is red-purple and partially fixed. Preservation is fair in the absence of embalming.

Scalp hair has a full distribution; it is brown and shows regrowth to 1/8 inch. The moustache and beard areas are clean shaven. The irides are hazel and the corneas are slightly cloudy. The conjunctival surfaces are pale and without petechiae. The ears, nose, and lips are normally developed. The teeth are natural and in very good condition. A few red blemishes are on the mid and lower face. A few crusted blemishes are on the parieto-occipital scalp, the right more affected than the left. No bony crepitation is palpated over the facial structures or skullcap. The neck is normally developed and symmetrical. The chest is normally developed and symmetrical with gunshot wounds, to be described. The abdomen is soft. The external genitalia are that of a normal adult male. Pubic hair shows moderate regrowth. The anus and perineum are unremarkable. The back and buttocks are normally developed and have no injuries. The extremities are normally developed and roughly symmetrical. During body movement in the autopsy, the fractured right distal radius evident by postmortem x-rays is displaced causing wrist deformity. There is scarred soft tissue defect and deformity with waffle print on the left medial foreleg. The fingernails and toenails are short and fairly groomed. Body and extremity hair is average in amount for an adult male.

IDENTIFYING MARKS AND SCARS:

A large multicolored tattoo of a dragon covers the left chest, shoulder and upper back. A monochromatic tattoo of a dog's face is on the right upper back. A 2 inch vertical oblique linear scar is on the right chest above the nipple. A 3 1/4 inch oblique linear scar is on the left anterior hip. A 9 1/2 inch vertical linear scar is on the left proximal anterior thigh. A 4 1/2 inch vertical linear scar is on the left anterior mid foreleg. The left medial foreleg has a vertical 9 x 3 1/2 inch scarred oval area of waffled skin with soft tissue loss.

EVIDENCE OF THERAPY:

An endotracheal tube emerges from the mouth, terminating in the right mainstem bronchus. A hard cervical collar is around the neck. EKG pads are on the body.

EVIDENCE OF INJURY:

GUNSHOT WOUNDS OF CHEST:

Gunshot Wound of Left Chest (GSW #1):

Entrance: The left upper chest within the face of the dragon tattoo, medial and superior to the nipple, 2 1/2 inches to the left of anterior midline and 14 1/2 inches below the top of the head, has a 3/8 inch round gunshot wound of entrance. The wound has a thin rim of circumferential marginal abrasion widest to 3/8 inch from the 1 to 2 o'clock positions. No soot or stippling is on the skin.

Injuries: The bullet penetrates soft tissues and musculature of the left anterior chest wall and abdominal wall without entering the body cavities.

Associated Injuries: Along the trajectory of the bullet is a fracture of anterior left rib 7 with associated soft tissue hemorrhage and a 3 inch light purple-blue cutaneous contusion.

Recovery: A large caliber moderately-deformed partially jacketed bullet is recovered in subcutis of the left abdomen, 5 1/4 inches to the left of anterior midline and 28 inches below the top of the head. The projectile is visible and palpable externally. Skin overlying the bullet has a 1/4 inch abraded contusion. A triangular fragment of yellow-metal jacket is recovered in the wound tract through the left anterior abdominal wall.

Path: The direction of the bullet is downward, slightly right to left and slightly front to back.

Range: The range of fire is indeterminate based on autopsy findings. Refer to separate clothing analysis if applicable.

Gunshot Wound of Left Lateral Chest (GSW #2):

Entrance: The left posterolateral chest, 15 inches below the top of the head in the posterior axillary line, has a 1/8-inch-round-gunshot-wound-of-entrance with a circumferential red marginal abrasion to 3/32 inch wide superiorly. No soot or stippling is on the skin.

Injury: The bullet perforates the left posterolateral chest wall through rib 7, left lower lobe of lung, left hemidiaphragm, descending thoracic aorta which is transected and has gaping separation with partial avulsion from the prevertebral soft tissues, medial right hemidiaphragm, liver, lateral right hemidiaphragm, right lower lobe of lung and the right posterolateral chest wall between ribs 9 and 10.

Associated Injuries: The left lower lobe of lung, left hemidiaphragm, liver and part of the right adrenal gland are pulpified along the wound tract. The left hemidiaphragm has a gaping defect through which the intact stomach and spleen are herniated into the left chest cavity. The posterolateral left 7th rib is fractured. There are bilateral hemothoraces with the left chest containing 1 liter of liquid blood, clot and pulpified fat, and the right chest containing 300 ml of liquid blood and clot. Trace hemoperitoneum is in the upper quadrants of the abdomen.

Recovery: A small caliber mildly-deformed fully jacketed bullet with a pointed nose and flattened deformity at the base with extrusion of lead is recovered in subcutis and musculature of right lateral-lower chest wall. Skin overlying the bullet has a 1 1/2 inch blue-purple contusion, 21 inches below the top of the head and roughly in the posterior axillary line.

Path: The direction of the bullet is left to right and downward, without significant front/back deviation.

Range: The range of fire is indeterminate based on autopsy findings. Refer to separate clothing analysis if applicable.

BLUNT FORCE INJURIES:

A 1/2 inch red abrasion is on the right forehead corresponding to a contusion in the scalp. A 3/8 inch red abrasion is on the left superior forehead and a 3/8 inch red abrasion is on the left lower forehead above the eyebrow. A 1/8 inch red abrasion is on the nasal bridge. A 1/4 inch red abrasion is on the right nasal ala. Three red-brown abrasions to 1/2 inch are on the right elbow. A 2 inch red contusion containing a 1 x 3/4 inch partially curvilinear red-brown abrasion is on the right radial distal forearm which has an underlying fracture of the radius. On the right dorsal forearm are several light red contusions up to 1/2 inch. The dorsal hands have a crusted nicks and scratches up to 3/8 inch, the left hand more affected than the right. The right anterior foreleg has a 4 1/2 inch curvilinear brown crusted abrasion with several small surrounding abrasions with crust up to 1/2 inch. The left lateral ankle has a 1/2 inch red-tan abrasion.

These injuries, having once been described, will not be repeated.

INTERNAL EXAMINATION:

The body is examined using the standard Y-shaped thoraco-abdominal and posterior scalp incisions.

BODY CAVITIES:

See previous description. The thoracic and abdominal organs are normal situs. The pleural cavities have no adhesions. The pericardial cavity has no abnormal collection of fluid and no adhesions. The abdominal cavity has abundant adipose tissue and no adhesions. Subcutaneous fat of the anterior abdominal wall measures approximately 1 1/2 inches.

HEAD:

See previous description. The subscalpular area has no hemorrhage. The calvarium and basilar skull are normally developed and have no fractures. The dura and dural sinuses are unremarkable. There are no epidural, subdural, or subarachnoid hemorrhages. The leptomeninges are thin and delicate. The cerebral hemispheres are symmetrical with the usual gyral distribution. The cranial nerves are unremarkable. The blood vessels at the base of the brain show no significant atherosclerosis. The brain weighs 1520 grams; it is firm and edematous. Sections through the cerebral hemispheres, cerebellum, and brainstem reveal normal internal architecture and no focal lesions. There are no hemorrhages in the deep white matter or the basal ganglia. The cerebral ventricles contain no blood.

NECK:

The soft tissues, strap muscles, and prevertebral fascia are unremarkable. The hyoid bone and larynx are intact. The cervical vertebral column is unremarkable.

CARDIOVASCULAR SYSTEM:

See previous description. The intimal surface of the thoracic and abdominal aorta is free of significant atherosclerosis. The aorta and its major branches and the great veins appear normally distributed. The pericardium and epicardium are smooth, glistening, and unremarkable. The heart

weighs 360 grams and has normal external architecture. The coronary arterial system is right dominant and shows no significant atherosclerosis. The endocardium is smooth and unremarkable. There are no thrombi in the cardiac chambers. The foramen ovale is closed. The atrial and ventricular septa are normally formed. The cardiac valves are unremarkable. The myocardium is dark red-brown and firm, and there are no focal abnormalities. The right ventricle extends minimally into the apex of the heart.

RESPIRATORY SYSTEM:

See previous description. The upper airway is unobstructed. The mucosa of the larynx and trachea is smooth and tan-pink. The lungs show normal lobation, and the pleural surfaces show no evidence of natural disease. The right lung weighs 340 grams and the left lung weighs 300 grams. The pulmonary arteries contain no emboli and show no fatty streaking. The mucosa of the major bronchi is unremarkable and the lumens contain a small amount of mucous. Sectioning the lungs discloses a pink parenchyma with minimal posterior congestion. There are no masses or areas of consolidations.

HEPATOBIILIARY SYSTEM:

See previous description. The 1710 gram liver is normally shaped and covered by a smooth, glistening capsule. The parenchyma has a uniform consistency; it is tan-brown and has no masses. The porta hepatis is unremarkable. The gallbladder contains approximately 10 ml of orange thin bile and no calculi. The extrahepatic biliary ducts are unremarkable.

DIGESTIVE SYSTEM:

See previous description. The tongue is unremarkable externally and on sectioning. The esophageal mucosa is gray-white and unremarkable. The intact stomach contains less than 5 ml of tan thin liquid and no food particles. There are no identifiable tablets, capsules, or pill fragments. The gastric mucosa has normal rugal folds and there are no ulcers. The small and large intestines are unremarkable externally and have non-bloody contents. The appendix is present and unremarkable. The pancreas is unremarkable externally and on sectioning.

GENITOURINARY SYSTEM:

The renal capsules strip with ease, revealing smooth cortical surfaces. The right kidney weighs 160 grams and the left kidney weighs 140 grams. The cortices are of normal thickness and the corticomedullary junctions are distinct. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains approximately 15 ml of clear yellow urine. The mucosa is white-pink and unremarkable. The prostate gland is unremarkable to palpation.

ENDOCRINE SYSTEM:

See previous description. The pituitary, thyroid, and left adrenal gland are unremarkable externally and on sectioning.

RETICULOENDOTHELIAL SYSTEM:

See previous description. The 180 gram spleen is covered by a smooth, blue-gray, intact capsule. The parenchyma is dark red. The lymph nodes are unremarkable.

MUSCULOSKELETAL SYSTEM:

See previous description. The clavicles, other ribs, sternum, pelvis, vertebral column, and the remainder of the extremities have no visualized or palpable fractures. Skeletal muscle is dark red and well-developed. The diaphragm shows no evidence of natural disease.

SPECIMENS FOR HISTOLOGY:

Representative sections of the major organs are retained in formalin.

SPECIMENS FOR TOXICOLOGY:

Femoral blood, left chest cavity blood, urine, bile and vitreous humor are retained. A urine drug screen is positive for THC. Toxicology analysis is requested on an aliquot of femoral blood.

POSTMORTEM RADIOGRAPHY:

Total body x-rays are taken postmortem and are reviewed prior to examination and autopsy. These show a small caliber projectile in the right lateral chest wall, a deformed large caliber bullet overlying shadows of the left hip, and two triangular radio-opaque projectile elements (corresponding to jacket) in shadows of the left chest and abdomen, a non-displaced right distal radius fracture, overlying shadows of jewelry, two screws in the left foot and numerous staples in the left foreleg with deformity and callous of the long bones in the left foreleg.

EVIDENCE COLLECTED:

Fingernail clippings, scalp hair standards, a purple-top vial of blood and the projectiles are released to SCSO.

KAA/wg; tn
D: 04-10-2007
T: 04-16-2007

Case Name:

TOXICOLOGY NUMBER: CVT-07-4941

DeSantis, Richard
Specimen Description: 5 ml femoral blood (gray top vial) labeled "DeSantis, Richard; SCCMF; 07-0443;
4/10/07; C Norick"

Delivered by	Date	Received by	Date
GSO	13-Apr-07	Bill Posey	13-Apr-07

Request: Complete Drug Screen & THC
Requesting Agency

Report To
07-0443

Sonoma Co. Sheriff/Coroner
Attn: Sgt. Mitch Mana
3336 Chanate Road
Santa Rosa CA 95404

Sonoma Co. Sheriff/Coroner
Attn: Records
3336 Chanate Road
Santa Rosa CA 95404

RESULTS

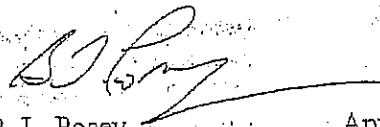
Specimen: Femoral Blood Sample

Complete Drug Screen: THC detected by specific drug assay.
No other common acidic, neutral or basic drugs detected.
No blood Ethyl Alcohol detected.

Cannabinoids (THC metabolite) by Immunoassay = Positive

delta-9-THC = 4.0 ng/mL
delta-9-THC-COOH = 7.3 ng/mL

Blood ranges reflecting THC influence are not well established. Duration of affect generally lasts from 4 to 6 hours. The parent compound, THC, drops below 5 ng/mL approximately 4 hours after use and becomes negative 6 hours after use. The non-active metabolite of THC, delta-9-THC-COOH, remains present in blood for about 12 to 24 hours.


B. L. Posey

April 30, 2007

Analyst

RECEIVED

B.L. POSEY
S.N. KIMBLE
Directors

1580 Tollhouse Road
Clovis, California 93611
Phone (559) 323-9940
Fax (559) 323-7502

MAY - 3 2007



Case Name:

TOXICOLOGY NUMBER: CVT-07-4941

DeSantis, Richard
Specimen Description: 10 ml femoral blood (gray top vial) labeled "DeSantis, Richard; SCCMF; 07-0443;
4/10/07; C Norick" ADDTL SAMPLE REC'D 07/25/07: 10 ml urine labeled same as
blood.

Delivered by	Date	Received by	Date
GSO	13-Apr-07	Bill Posey	13-Apr-07

Request: Complete Drug Screen & THC
Requesting Agency

Sonoma Co. Sheriff/Coroner
Attn: Sgt. Mitch Mana
3336 Chanate Road
Santa Rosa CA 95404

Report To
Sonoma Co. Sheriff/Coroner
Attn: Records
3336 Chanate Road
Santa Rosa CA 95404

RESULTS

Specimen: Femoral Blood Sample
Complete Drug Screen: THC detected by specific drug assay.
No other common acidic, neutral or basic drugs detected.
No blood Ethyl Alcohol detected.

Cannabinoids (THC metabolite) by Immunoassay = Positive

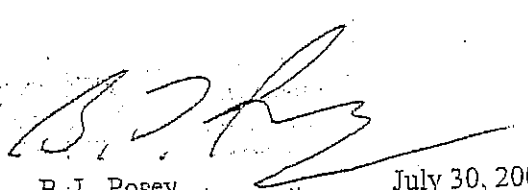
delta-9-THC = 4.0 ng/mL
delta-9-THC-COOH = 7.3 ng/mL

Blood ranges reflecting THC influence are not well established. Duration of affect generally lasts from 4 to 6 hours. The parent compound, THC, drops below 5 ng/mL approximately 4 hours after use and becomes negative 6 hours after use. The non-active metabolite of THC, delta-9-THC-COOH, remains present in blood for about 12 to 24 hours.

**** 25, July 2007, Additional testing requested: Second Report ****

Specimen: Urine Sample
Specific Drug Screen/Confirmation/Low Level:
Methamphetamine by Immunoassay = Negative

Urine MDA (Methylenedioxyamphetamine) = 0.13 mg/L


B.L. Posey

July 30, 2007

Analyst

RECEIVED

AUG - 2 2007

B.L. POSEY
S.N. KIMBLE
Directors

1580 Tollhouse Road
Clovis, California 93611
Phone (559) 323-9940
Fax (559) 323-7502